



Federal activities to protect, promote, and support breastfeeding

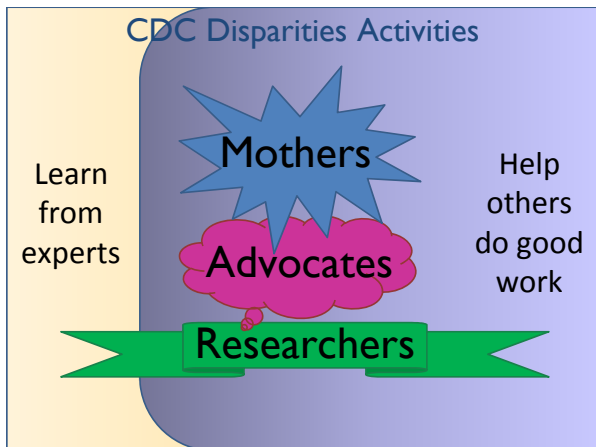
Western Region Nutrition Coordinator Meeting
March 3, 2010

Katherine Shealy, MPH, IBCLC, RLC
Public Health Advisor, Breastfeeding Specialist
Division of Nutrition, Physical Activity, and Obesity



CDC Breastfeeding Activity Focus Areas

- Reducing inequities in breastfeeding rates
- Improving maternity care practices
- Supporting Federal and State partners
 - Fostering collaboration
 - Increasing capacity
 - Providing tools and other resources



Disparities activities – Learn from Experts

- Focus groups among African-American mothers with short breastfeeding duration
- National Expert Panel Meeting on Black-White Disparities in Breastfeeding

Disparities activities – Help Others

- Collaboration with Women’s e-News on RWJ funded Black Maternal Health Project
- Targeted project evaluation funding to grow the science on interventions to improve rates among African-American mothers
 - Post-discharge telephone follow-up support
 - Collaboration with YMCA teen mom intervention
 - RCT of “Ban the Bags”

One mom’s tally – 6 months of mail

Vendor	Formula Packages	Equivalent Volume	Total Packages	Coupons
Mead Johnson	8 cans @ 13 oz 8 Packets @ .65 oz	786 oz	16	\$45
Abbott	7 cans @ 12.9 oz	650 oz	7	\$155
Nestlé	3 cans @ 12 oz each 2 cans @ 13 oz each 1 can @ 25.8 oz	632 oz	6	\$75
Heinz	2 cans @ 25.8 oz 1 case (12 bottles) @ 2 oz	396 oz	26	\$15
Member’s Mark	1 package @ 4.4 oz	32 oz	1	
Parent’s Choice	1 package @ 4.3 oz	31 oz	1	
Grand Total		2527 oz	57 pkg	\$290

1 can of 23 oz PIF (168 fluid oz prepared) ≈ \$21
Daily intake of 3 month old ≈ 32 oz or 6 bottles

One mom’s tally – 6 months of mail

“Samples” total = 2527 oz prepared
= 79 days
= 2.6 months’ supply

Coupons total = \$290
= 12 cans
= 2016 oz prepared
= 63 days
= 2.1 months’ supply

TOTAL = 4.7 months exclusive formula

39%



Receiving commercial discharge packs increases likelihood to supplement within 10 weeks by 39%. (Oregon PRAMS)

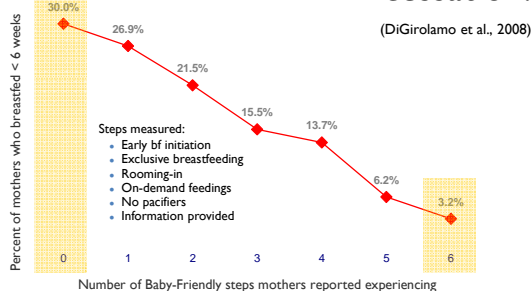
Breastfeeding at 8 weeks

Percent of mothers (interviewed at 8 wks postpartum about hospital experiences) (Murray et al., 2007)

Hospital Experience		No	Yes
66	Breastfeeding in the 1 st hour	66	77
65	No supplemented feeding	65	81
62	Rooming-in	62	74
69	No pacifiers	69	78
64	Phone number given to mothers	64	75

Approx mean diff = 12%

The number of *Baby Friendly* steps in place predicts risk of breastfeeding cessation.



In-hospital supplemental feeds reduce breastfeeding opportunities.

(Nylander, et al. 1991)

Control (ad lib supplementing)	In-hospital Behaviors	Intervention (med indicated supplementing)
4.8 feeds	Supplementary feeds/24 h on day 2	1.1 feeds
188 ml	Volume of supplement on day 2	23 ml
100%	Supplementing on day 2	2%
565 ml	Total supplement consumed days 1-3	68 ml
4.3 feeds	Breastfeeds/24 hr on day 2	6.4 feeds
47 ml	Volume of breast milk on day 2	132 ml
2%	Night-time breastfeeding	98%

mPINC Methodology

National Census

- Every facility in the US and territories that routinely provides maternity care.

Established Methodology

- Survey design and administration modeled after 3 statewide surveys of maternity care practices.

Facility is unit of analysis

- Single key informant completes paper or web survey on behalf of the facility.

High response rate in 2007

- 82% of all facilities responded
- 10 states with response rate ≥90%

mPINC Methodology

52 questions about care of healthy term infants

- 36 items are categorized into the 7 maternity practice dimensions.

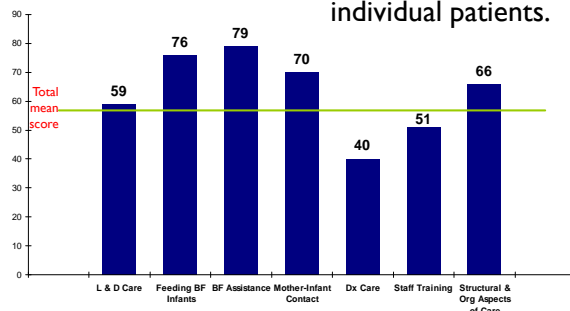
Points are assigned to responses to every question.

- Higher points are given for practices that are supportive of breastfeeding.

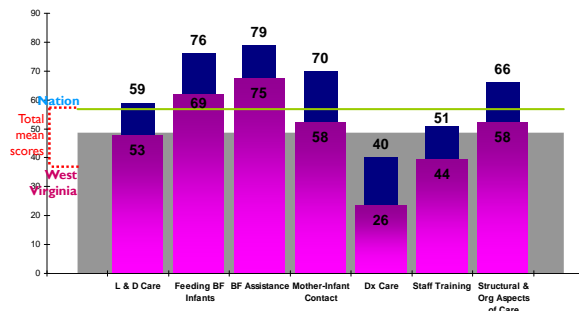
Care dimension subscores = average of points for each item in the dimension.

Composite quality scores = average of care dimension subscores.

Typical maternity care in the US includes many types of problematic practices.
 Most practices are beyond the control of individual patients.



Practices vary widely across states.



Federal steering committee **SG Call to Action**

- HHS/OWH (managing editor)
- CDC (scientific editor)
- HRSA/MCHB
- IHS
- NIH
- USDA/FNS
 - Public comment April 1-May 31, 2009
 - Expert panel meeting April 28-29, 2009
 - Stakeholder hearing July 30, 2009
 - Stakeholder hearing August 13, 2009

US Breastfeeding Committee strategic plan
 Breastfeeding and Feminism
 ABM Breastfeeding Summit

Themes Across Call to Action Stakeholder Input Opportunities

- Strong call for paid maternity leave
- Call for better federal coordination/attention on breastfeeding
- Recommendations to use Web 2.0 for communication
- Recommendation for FDA to regulate formula efficacy



MAPPS framework:
Communities Putting Prevention to Work

	Tobacco	Nutrition	Physical Activity
Media			
Access			
Point of Purchase/Promotion			
Price			
Social Support & Services		Support breastfeeding through policy change and maternity care practices	



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CDC Breastfeeding Workgroup

- | | |
|----------------------|--------------------|
| Jessica Allen | Paulette Murphy |
| Diane Ayers | Meredith Reynolds |
| Heidi Blanck | Kelley Scanlon |
| Deborah Dee | Katherine Shealy |
| Larry Grummer-Strawn | Cassie Sheldon |
| Ruwei Li | Lorraine Whitehair |
| Carol MacGowan | |

www.cdc.gov/breastfeeding



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